

# Firm Ownership, CPA Employees & Other State License Confirmation Tennessee State Board of Accountancy

500 James Robertson Parkway, Nashville TN 37243

Must be completed by all firms for initial licensure and all firms (other than those held as sole proprietorships with no CPA employees) at license renewal or when there are changes to any category listed below.

Mail to address noted above or scan and e-mail to [patricia.a.turner@tn.gov](mailto:patricia.a.turner@tn.gov) or fax to 615-532-8000.

**Provide information for all 4 sections of the form – using Not Applicable or N/A if the area does not apply.**

**Complete the following table for all CPA Owners regardless of state of licensure or residency:**

Name	Address	CPA Lic. No.	State	Percent Interest Own	Vote	Attest Yes/No

**Complete the following table for all NON-CPA Owners regardless of state of licensure or residency:**

Name	Address	Percentage of: Work Time    Own    Vote		

**Complete the following table for CPA Employees regardless of state of licensure or residency:**

Name	Address	CPA Lic. No.	State	Attest Yes/No

**Complete the following table concerning other state CPA Firm Licenses:**

State	Permit #	Applied	Granted	Denied	Revoked	Suspended

\_\_\_\_\_  
Print Firm Name

\_\_\_\_\_  
TN Firm No.

\_\_\_\_\_  
Signature Resident Manager

\_\_\_\_\_  
Date